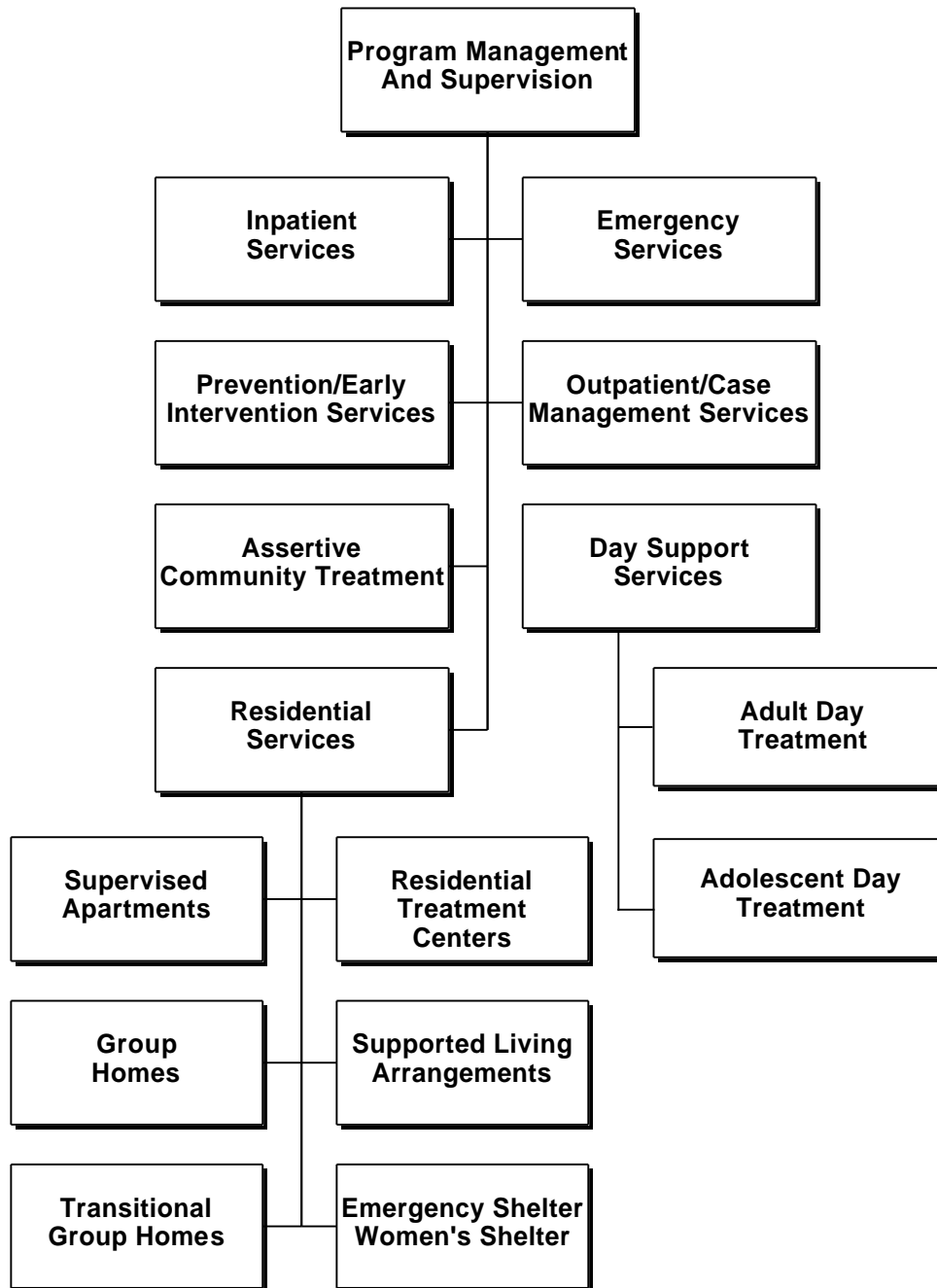


MENTAL HEALTH SERVICES



FUND 106-30

CSB MENTAL HEALTH SERVICES

Agency Position Summary

425	Regular Positions (2)	/	414.85	Regular Staff Years (4.0)
<u>33</u>	Grant Positions	/	<u>29.30</u>	Grant Staff Years
458	Total Positions (2)	/	444.15	Total Staff Years (4.0)

Position Detail Information

MERIT REGULAR POSITIONS:

PROGRAM MANAGEMENT AND SUPERVISION

1	Director - Mental Health Programs	
1	Director - CSB Planning and Development	
1	Psychiatrist (Director - Medical Services), PT	
7	Mental Health Division Directors	
2	Mental Health Managers	
2	Mental Health Supervisor/Specialists, 1 PT	
1	Business Analyst II	
2	MH/MR/SAS Senior Clinicians, 1 PT	
1	Medical Records Administrator	
1	Volunteer Services Coordinator II	
1	Office Service Manager II	
1	Office Service Manager I	
3	Secretaries II	
10	Secretaries I, (0/0.5)	
7	Supervisory Clerks	
2	Account Clerks II	
1	Account Clerk I	
19	Clerical Specialists (0/0.5)	
4	Clerk Typists II (0/0.5)	
1	Telephone Operator II	
68	Positions	
66.5	Staff Years (1.5)	

INPATIENT SERVICES

1	MH/MR/SAS Senior Clinician	
1	Position	
1.0	Staff Year	

EMERGENCY SERVICES

General Emergency

1	Mental Health Manager	
12	Mental Health Supervisor/Specialists	
5	Psychiatrists	
18	Positions	
18.0	Staff Years	

Forensic Services

1	Mental Health Manager	
4	MH/MR/SAS Senior Clinicians, 1 PT	
2	Mental Health Supervisor/Specialists	
3	Clinical Psychologists	
2	Psychiatrists	
12	Positions	
11.5	Staff Years	

Mobile Crisis Unit

1	Mental Health Manager	
4	Emergency Mobile Crisis Supervisors	
3	Mental Health Supervisor/Specialists	
8	Positions	
7.5	Staff Years	

Entry Services

1	Mental Health Manager	
3	Mental Health Therapists	
4	Positions	
4.0	Staff Years	

DAY SUPPORT SERVICES

Adult Day Treatment

2	Mental Health Managers	
1	Mental Health Supervisor/Specialist	
1	Mental Health Therapists	
8	MH/MR/SAS Senior Clinicians	
1	Mobile Clinic Driver	
1	Psychiatrist	
14	Positions	
14.0	Staff Years	

Adolescent Day Treatment

1	Mental Health Manager	
1	Mental Health Supervisor/Specialist	
4	Mental Health Therapists	
1	MR/MH/SAS Aide	
7	Positions	
7.0	Staff Years	

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CSB MENTAL HEALTH SERVICES

RESIDENTIAL SERVICES

Supervised Apartments

1	Mental Health Manager
4	Mental Health Supervisor/Specialists
8	Mental Health Therapists
13	Positions
13.0	Staff Years

Residential Treatment Center - Fairfax House

1	Mental Health Manager
1	Mental Health Supervisor/Specialist
4	Mental Health Therapists
2	MH/MR/SAS Senior Clinicians
1	Cook
9	Positions
9.0	Staff Years

Res. Treatment Center - Rock Hill Crisis Care

1	Mental Health Manager
1	Mental Health Supervisor/Specialist
8	Mental Health Therapists
2	Mental Health Counselors
12	Positions
12.0	Staff Years

Res. Treatment Center - Gregory Rd. Crisis Care

1	Mental Health Supervisor/Specialist
8	Mental Health Therapists
2	Mental Health Counselors
11	Positions
11.0	Staff Years

Group Home - Franconia Road

1	Mental Health Supervisor/Specialist
3	Mental Health Therapists
4	Mental Health Counselors
8	Positions
8.0	Staff Years

Group Home - My Friend's Place

1	Mental Health Supervisor/Specialist
4	Mental Health Therapists
1	MH/MR/SAS Senior Clinician
1	Mental Health Counselor
7	Positions
7.0	Staff Years

Group Home - Braddock Crossing

1	Mental Health Supervisor/Specialist
4	Mental Health Therapists
1	MH/MR/SAS Senior Clinician
1	Mental Health Counselor
7	Positions
7.0	Staff Years

Group Home - Oakton Arbor

1	Mental Health Supervisor/Specialist
4	Mental Health Therapists
1	MH/MR/SAS Senior Clinician
1	Mental Health Counselor
7	Positions
7.0	Staff Years

Homeless Services - Shelter

3	Mental Health Supervisor/Specialists
10	Mental Health Therapists
13	Positions
13.0	Staff Years

Transitional Group Home - Patrick Street

1	Mental Health Manager
1	Mental Health Supervisor/Specialist
3	Mental Health Therapists
3	Mental Health Counselors
8	Positions
8.0	Staff Years

Transitional Group Home - Beacon Hill

1	Mental Health Supervisor/Specialist
3	Mental Health Therapists
3	Mental Health Counselors
7	Positions
7.0	Staff Years

Emergency Shelter - Women's Shelter

1	Mental Health Supervisor/Specialist
6	Mental Health Therapists
1	MH/MR/SAS Senior Clinician
8	Positions
8.0	Staff Years

Cornerstones Dual Diagnosis Facility

1	Mental Health Supervisor/Specialist
1	Mental Health Therapist
3	Mental Health Counselors
1	MH/MR/SAS Senior Clinician
6	Positions
6.0	Staff Years

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CSB MENTAL HEALTH SERVICES

Residential Intensive Care

1 Mental Health Manager
3 Mental Health Therapists
1 Assistant Residential Counselor
5 Positions
5.0 Staff Years

Residential Extensive Dual Diagnosis

1 Mental Health Supervisor/Specialist
1 Mental Health Therapist
1 Mental Health Counselor
3 Positions
3.0 Staff Years

PACT Residential Assistance

1 Mental Health Counselor
1 Position
1.0 Staff Year

Community Living Assistance

1 Mental Health Supervisor/Specialist
1 Mental Health Therapist
1 Assistant Residential Counselor
3 Positions
2.5 Staff Years

Supportive Services

1 Mental Health Manager
4 Mental Health Therapists
5 Positions
5.0 Staff Years

OUTPATIENT/CASE MANAGEMENT SERVICES

Adult and Family Services

4 Mental Health Managers
7 Mental Health Supervisor/Specialists
18 MH/MR/SAS Senior Clinicians, 2 PT
3 Mental Health Therapists
1 Nurse Practitioner
4 Psychiatrists, 2 PT
1 Psychology Intern
38 Positions
36.1 Staff Years

Older Adult Services

1 Mental Health Supervisor/Specialist
4 MH/MR/SAS Senior Clinicians
4 Mental Health Therapists, 1 PT
1 Psychiatrist, PT
10 Positions
9.0 Staff Years

Youth and Family Services

5 Mental Health Managers
6 Mental Health Supervisor/Specialists
17 MH/MR/SAS Senior Clinicians, 1 PT
6 Mental Health Therapists (1)
2 Psychiatrists, 2 PT
7 Clinical Psychologists (1)
3 Psychology Interns
46 Positions (2)
44.75 Staff Years (2.0)

Comprehensive Support Services

3 Mental Health Managers
9 Mental Health Supervisor/Specialists
14 MH/MR/SAS Senior Clinicians, 1 PT
13 Mental Health Therapists, 1 PT
4 Psychiatrists, 1 PT
1 Psychology Intern
44 Positions
42.5 Staff Years

Special Outpatient Case Management

3 Mental Health Supervisor/Specialists
4 MH/MR/SAS Senior Clinicians
3 Mental Health Therapists (0/0.5)
10 Positions
10.0 Staff Years (0.5)

Infant/Toddler - LINCS

1 Mental Health Supervisor/Specialist
3 MH/MR/SAS Senior Clinicians, 1 PT
4 Positions
3.5 Staff Years

PREVENTION/EARLY INTERVENTION SERVICES

Prevention

2 Mental Health Supervisor/Specialists
2 Positions
2.0 Staff Years

Early Intervention

2 Mental Health Supervisor/Specialists
2 MH/MR/SAS Senior Clinicians, 1 PT
2 Mental Health Therapists, 1 PT
6 Positions
5.0 Staff Years

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CSB MENTAL HEALTH SERVICES

MERIT GRANT POSITIONS:

RESIDENTIAL SERVICES

Supervised Apartments

2 Mental Health Therapists, 2 PT
2 Positions
1.0 Staff Years

Franconia Road

1 Mental Health Manager
1 Position
1.0 Staff Year

PATH/McKinney - Homeless Shelters

2 Mental Health Therapists
2 Positions
2.0 Staff Years

Residential Intensive Care

2 Mental Health Therapists
1 Assistant Residential Counselor
3 Positions
3.0 Staff Years

Residential Extensive Dual Diagnosis

2 Mental Health Therapists
1 Mental Health Counselor
3 Positions
3.0 Staff Years

Extension Apartments

3 Mental Health Therapists
3 Positions
3.0 Staff Years

OUTPATIENT SERVICES

Youth and Family Services

1 MH/MR/SAS Senior Clinician
1 Position
1.0 Staff Year

Ryan White CARE Act

1 MH/MR/SAS Senior Clinician
1 Position
1.0 Staff Year

PREVENTION/EARLY INTERVENTION

Sexual Assault Prevention Grants

3 Mental Health Therapists, 3 PT
1 Human Services Coordinator II, PT
1 Volunteer Service Coordinator I, PT
5 Positions
2.5 Staff Years

PROG. OF ASSERTIVE COMMUNITY TREATMENT

1 Mental Health Manager
3 Mental Health Supervisor/Specialists
3 Mental Health Therapists
1 Psychiatrist, PT
3 Public Health Nurses III
1 Clerical Specialist
12 Positions
11.8 Staff Years

PT Denotes Part-Time Positions

() Denotes New Positions

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CSB MENTAL HEALTH SERVICES

Agency Mission

To provide Countywide leadership, ensuring that consumers and/or their families receive quality clinical and community support programs by managing, supervising, planning, evaluating, and allocating resources of the directly operated and contractual mental health programs and collaborating with agencies, consumers, and advocates.

Agency Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff					
Years					
Regular	422/ 408.65	422/ 408.65	423/ 410.85	425/ 414.85	425/ 414.85
Grant	29/ 26.8	29/ 26.8	33/ 29.3	33/ 29.3	33/ 29.3
Expenditures:					
Personnel Services	\$27,155,366	\$29,375,023	\$29,271,612	\$31,133,624	\$31,453,947
Operating Expenses	4,553,154	4,341,796	4,357,251	4,626,659	4,626,659
Capital Equipment	697	0	0	0	0
Subtotal	\$31,709,217	\$33,716,819	\$33,628,863	\$35,760,283	\$36,080,606
Less:					
Recovered Costs	(\$711,334)	(\$854,593)	(\$861,593)	(\$997,632)	(\$1,006,471)
Total Expenditures	\$30,997,883	\$32,862,226	\$32,767,270	\$34,762,651	\$35,074,135
Revenue:					
Fairfax County	\$18,374,794	\$18,759,529	\$20,635,057	\$19,718,080	\$20,029,564
Fairfax City	367,027	380,875	380,875	405,061	405,061
Falls Church City	184,367	205,991	205,991	203,466	203,466
State MHMRSAS	6,172,416	6,813,924	6,794,373	6,743,578	6,743,578
State Other	11,835	0	25,281	16,691	16,691
Federal Block Grant	1,335,272	1,438,177	1,329,474	1,341,481	1,341,481
Federal Other	125,092	20,000	188,573	194,909	194,909
Medicaid Option	881,557	1,046,306	816,263	1,191,306	1,191,306
Program/Client Fees	1,107,886	2,422,309	1,083,846	2,877,309	2,877,309
CSA Pooled Funds	1,328,966	1,487,275	1,378,631	1,645,550	1,645,550
Miscellaneous	320,922	287,840	128,906	125,220	125,220
Fund Balance	787,749	0	(200,000)	300,000	300,000
Total Revenue	\$30,997,883	\$32,862,226	\$32,767,270	\$34,762,651	\$35,074,135

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CSB MENTAL HEALTH SERVICES

Summary by Cost Center					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Program Management and Supervision	\$4,442,549	\$4,981,051	\$4,784,120	\$5,116,692	\$5,163,571
Inpatient Services	94,101	166,559	95,028	63,180	63,812
Emergency Services	2,876,988	2,835,053	2,900,149	3,036,210	3,066,643
Day Support Services	1,402,602	1,554,222	1,505,362	1,649,460	1,665,257
Residential Services	9,115,886	10,185,934	9,928,436	10,688,481	10,777,271
Outpatient/Case Management Services	11,862,357	11,899,907	12,194,013	12,334,702	12,447,128
Prevention/Early Intervention Services	541,455	510,347	642,767	674,683	681,210
Assertive Community Treatment	661,945	729,153	717,395	1,199,243	1,209,243
Total Expenditures	\$30,997,883	\$32,862,226	\$32,767,270	\$34,762,651	\$35,074,135

Board of Supervisors' Adjustments

The following funding adjustments reflect all changes to the FY 2002 Advertised Budget Plan, as approved by the Board of Supervisors on April 30, 2001:

- The 1.0 percent cost-of-living adjustment approved by the Board of Supervisors, and previously held in reserve, has been spread to County agencies and funds. This action results in an increase of \$311,484 in Mental Health Services. This action consists of an increase of \$320,323 in Personnel Services and an increase of \$8,839 in Recovered Costs.

The following funding adjustments reflect all approved changes to the FY 2001 Revised Budget Plan from January 1, 2001 through April 23, 2001. Included are all adjustments made as part of the FY 2001 Third Quarter Review:

- A net decrease of \$348,090, fully offset with commensurate non-County revenue adjustments, is included to reflect actual grant allocations based on the most up-to-date information available from the grantors. The decreases include \$396,181 in Program of Assertive Community Treatment (PACT) funds and \$12,007 in PATH/McKinney funds. The funding increases include \$42,949 in Virginia Department of Social Services Domestic Violence Crisis Service Grant funds and \$17,149 for the INOVA Community Access program.
- Various internal funding adjustments and alignments were made between CSB agencies to reflect updated expenditure needs and revenue projections for the remainder of FY 2001. These adjustments result in an additional net decrease of \$275,253 in Mental Health Services due primarily to managed position vacancies.

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CSB MENTAL HEALTH SERVICES

County Executive Proposed FY 2002 Advertised Budget Plan

Purpose

The Office of Mental Health Services provides County/City-wide leadership in the management, supervision, planning, evaluation, and resource allocation of local, State, Federal, and other resources to ensure that consumers and families of persons with serious mental illness and serious emotional disturbance receive quality clinical and community support services. The Office of Mental Health Services has responsibility and authority for managing the six directly-operated community mental health center sites and oversight of the purchase of services from contractual mental health organizations included in the Fairfax-Falls Church Community Services Board (CSB). The six mental health service sites and contract agencies ensure Countywide access to mental health care.

Services are broken into eight specific categories, or Cost Centers. They include the *Program Management and Supervision* Cost Center, providing management, programming, financial monitoring, training and general support services. The *Inpatient* Cost Center provides acute care inpatient psychiatric beds at Inova's Mount Vernon Hospital for CSB patients who are medically indigent and provides service coordination and discharge planning. The *Emergency* Cost Center provides 24 hour-per-day comprehensive psychiatric emergency services to individuals in crisis situations. The *Day Support* Cost Center provides an intensive, highly structured stabilization, evaluation and treatment setting for adults with serious mental illness and adolescents with serious emotional disturbance, including those who are dually diagnosed. The *Residential* Cost Center provides residential treatment and supported residential services to adults with serious mental illness and youth with serious emotional disturbance. The *Outpatient and Case Management* Cost Center provides an array of treatment services to adults, children and their families. The *Program for Assertive Community Treatment* (PACT) team offers outreach and treatment services for individuals with serious mental illness. Finally, the *Prevention and Early Intervention* Cost Center provides consultation to community agencies, the public and other providers.

Key Accomplishments

- ◆ Created a Medical Services Unit including: expansion of psychiatric services and emergency medical services; expanded access to atypical medications; the establishment of medical screening protocols; the enhancement of pharmacy services; and the establishment of a system to monitor the utilization and effectiveness of psychiatric services and medications.
- ◆ Established a contract with the Inova Health Care System for the provision of short-term inpatient psychiatric care at Mount Vernon Hospital.
- ◆ Reorganized Youth and Family Services, Adult Residential Services and Emergency Services divisions to better align their structures with the changing demands on their service provision.
- ◆ Continued provision of intensive treatment and residential services to adults with serious and persistent mental illness who are being discharged from a Virginia state psychiatric hospital through the Discharge Assistance and Diversion (DAD) project.
- ◆ Implemented the Program for Assertive Community Treatment (PACT), a primarily State-supported initiative that provides intensive, comprehensive outreach and treatment services for individuals with serious mental illness and extensive history of psychiatric hospitalizations that are unable to effectively utilize conventional clinic-based services.

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CSB MENTAL HEALTH SERVICES

- ◆ Received new State dollars in FY 2000 to expand residential support services for dually diagnosed individuals who have both serious mental illness and substance abuse problems, and to expand available intensive residential support services for individuals with serious mental illness. These new State dollars also enabled the development of a rental assistance program for individuals with serious mental illness which gives priority to clients who are involved in the PACT Program.
- ◆ Nurse Practitioners were introduced to the agency in an effort to create an appropriate and cost effective alternative for medication related services that were traditionally performed by Psychiatrists.
- ◆ An agency-wide Administrative Support Study was conducted that identified problem areas and recommended changes to the current structure to improve support in areas such as Medications Clinics and Record Rooms.
- ◆ In FY 2001, the Office of Mental Health and Alcohol and Drug Services implemented several initiatives, which further the integration of residential services for individuals with co-occurring disorders. Accomplishments to date include, but are not limited to, a single point of entry, a single comprehensive assessment tool, and a single admission procedure with one referral application.

FY 2002 Initiatives

- ◆ The addition of 2/2.0 SYE new positions (1/1.0 SYE Clinical Psychologist and 1/1.0 SYE Mental Health Therapist) will support the existing need for mental health services at the Juvenile Detention Center (JDC). Limited mental health services (approximately 5 hours of counseling per week) are currently provided by CSB at the JDC, an amount that is far less than needed. Approximately 1,630 youths are placed in this facility every year, and studies indicate that as many as 77 percent of these youths experience some form of mental illness. The two positions will provide full-time direct-care staff at the JDC dedicated to this population.
- ◆ The expansion of four existing part-time positions (0/2.0 SYE) to full-time status will support the existing need for sign-language services and administrative support, based on the results of an agency-wide study.
- ◆ Develop an action plan for the comprehensive Administrative Support Study to address agency-wide issues.
- ◆ Reorganize the Mental Health Management Team to enhance oversight of daily clinical operations, address issues of Quality Improvement, facilitate site management activities, and better integrate Outpatient, Case Management and Community Support Services.
- ◆ Continue the Workplace Assessment process that was begun to focus on performance management, empowering others, developing staff and valuing diversity.
- ◆ Address space needs agency-wide, including the renovation and expansion of existing sites, as well as the acquisition of additional space in new county Human Services sites.
- ◆ Implement a pilot for the Texas Medication Algorithms Project at the medication clinics at two of the main mental health sites. This project is designed to facilitate clinical decision making, reduce unnecessary variation in clinical practice patterns, improve outcomes, facilitate consistent treatment across different service systems, and increase the cost efficiency of treatment.

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CSB MENTAL HEALTH SERVICES

Performance Measurement Results

The Performance Measures that have been developed by the Office of Mental Health Services provide a tool that can be used to assess the effectiveness of the broad range of service programs that are provided to the citizens of Fairfax County who have mental health needs. These indicators are used to evaluate the operations of programs across all Cost Centers and include Emergency Services, Outpatient Services, Residential Services, Day Support, and Contract Agency Services. For FY 2000 most of the indicators met or exceeded the goals, which indicates that the programs are operating effectively and meeting the needs of the people that are receiving services.

The mission of the Emergency Services unit is to provide immediate and comprehensive psychiatric services to individuals who are in crisis. Emergency Services' goal is to help individuals resolve their crisis and avoid hospitalization unless clinically needed. In FY 2000, Emergency Services staff was very successful in meeting their goal, as 96 percent of individuals served by the Emergency Services professional staff were able to deal with their crises in the community and consequently avoided hospitalization. The expectation is that the number of individuals who are able to avoid hospitalization in FY 2002 and FY 2003 will continue to be high.

A major goal for individuals with serious mental illness is to have their own home and live in the community with the appropriate clinical and residential supports. The goal of the Supportive Living Program is to provide the needed clinical services and supports to make this possible. In FY 2000, 78 percent of all consumers served in this program were able to stay in their own housing arrangement for the entire year continuing into the next fiscal year. Consumers served in this program will continue to receive the needed clinical and other supports from the professional staff. As a result of this ongoing support, it is anticipated that at least three quarters of all consumers who participate in the program will be able to stay in their own homes.

Provision of quality services is dependent on feedback from the consumers who receive the services. The Adult and Family Program has utilized a nationally recognized consumer satisfaction instrument, in addition to focus groups, to solicit information from consumers about their experience with the services provided. From the responses received, 93 percent of the consumers who completed the surveys expressed overall satisfaction with the services that they received. Based on feedback received, staff will use the information as part of the CSB's continuous quality improvement efforts. For FY 2002 and FY 2003, it is expected that this percentage will remain at a 93 percent satisfaction rate.

For those programs that are not meeting their performance goals, reviews will be conducted to determine what changes or modifications may be necessary to bring the indicators in line with performance goals for the agency.

Funding Adjustments

The following funding adjustments from the FY 2001 Revised Budget Plan are necessary to support the FY 2002 program:

- ◆ An increase of \$1,322,720 in Personnel Services associated with salary adjustments necessary to support the County's compensation program. This will allow for the expansion of four existing part-time (0/2.0 SYE) positions to full-time status. Included in this amount is \$113,775 for 2/2.0 SYE new positions providing mental health services at the Juvenile Detention Center.
- ◆ An increase of \$192,357 in Operating Expenses is due primarily to an increase of \$153,004 for projected increased lease obligations based on the current rental market in Fairfax County, and various miscellaneous adjustments resulting in an increase of \$39,353.
- ◆ An increase of \$143,039 in Recovered Costs reflects increased costs associated with CSB positions charged to the Office of the Sheriff, as well as the costs associated with 2/2.0 SYE new positions at the Juvenile Detention Center for mental health-related services provided in detention facilities.

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Revenue adjustments required to support the FY 2002 program include:

- ◆ An increase of \$1,158,551, or 6.2 percent, in Fairfax County funding is due primarily to the FY 2002 program adjustments listed above. Total FY 2002 County funding will be \$19,718,080. It should be noted that anticipated available Fund Balance of \$300,000 will also be used in FY 2002 to support Mental Health Services programs.
- ◆ An increase of \$21,661, or 3.7 percent, in payments from the Cities of Fairfax and Falls Church. Total funding from the Cities of Fairfax and Falls Church will be \$608,527.
- ◆ A decrease of \$496,890, or 6.9 percent, in State funding is due primarily to a reduction of \$301,954 of deferred State revenue for Mental Health Services Program of Assertive Community Treatment (PACT) since no funds are expected to be carried over to FY 2002. An increase of \$162,620 is due to the transfer of Discharge Assistance and Diversion (DAD) funds from Miscellaneous revenue. A commensurate decrease is shown in Miscellaneous revenue. The remaining net decrease of \$357,556 is due to a reallocation of DMHMRSAS funds from this agency to Mental Health Contract Services to be consistent with the CSB State Performance Contract. Total DMHMRSAS funding will be \$6,743,578.
- ◆ A decrease of \$27,634 in Federal Block Grant funding reflects the reallocation of the Mental Health Block Grant for Children and Adolescents to Mental Health Contracts based on programmatic requirements. Total Federal Block Grant funding will be \$1,341,481.
- ◆ Other Federal funding is increased \$20,695, or 11.9 percent, from the *FY 2001 Revised Budget Plan* total of \$174,214 to incorporate out-of-cycle Federal grant awards including V-STOP and Titles I and II of the Ryan White CARE Act. Total Other Federal funding will be \$194,909.
- ◆ An increase of \$145,000 or 13.9 percent in projected Medicaid State Plan Option collections is based upon recommendations of a Statewide task force to expand the Mental Health Targeted Support service coverage. Total Medicaid Option funding will be \$1,191,306.
- ◆ An increase of \$255,000 or 9.7 percent in projected Program/Client Fees is based upon increased capacity to bill claims to additional insurance companies. Total Program/Client Fee funding will be \$2,877,309.
- ◆ An increase of \$158,275, or 10.6 percent, in Comprehensive Services Act (CSA) Pooled Funds is based on full cost recovery through fee-for-services through CSA. Total CSA Pooled Funds revenue will be \$1,645,550.
- ◆ A decrease of \$162,620 in Miscellaneous revenue is due to the transfer of the Discharge Assistance and Diversion (DAD) program oversight from the Northern Virginia Mental Health Institute to DMHMRSAS. A commensurate increase is shown in State DMHMRSAS revenue.

The following funding adjustments reflect all approved changes in the FY 2001 Revised Budget Plan since passage of the FY 2001 Adopted Budget Plan. Included are all adjustments made as part of the FY 2000 Carryover Review and all other approved changes through December 31, 2000:

- ◆ As part of the FY 2000 Carryover Review, \$301,954 was included reflecting deferred State revenue for Mental Health Services Program of Assertive Community Treatment (PACT) to cover personnel and residential treatment expenditures in FY 2001.

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- ♦ As part of the FY 2000 Carryover Review, an amount of \$226,433 was included to reflect the carryover of unexpended funds, to continue the workload associated with existing grant awards, and to adjust for DMHMRSAS State allocations. These items include PACT, Children's Mental Health Services, Residential and Support Services for Adults with Serious Mental Illness, the Sexual Assault Crisis Services grant, Title II of the Ryan White CARE Act, and the Project for Assistance to Transition from Homelessness (PATH) grant.



Program Management and Supervision

Goal

To provide management, programming, financial monitoring, training, and general support services to ensure that treatment interventions are delivered in an efficient and effective manner throughout Mental Health Services.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	67/ 64.5	67/ 64.5	68/ 65	68/ 66.5	68/ 66.5
Total Expenditures	\$4,442,549	\$4,981,051	\$4,784,120	\$5,116,692	\$5,163,571

Objectives

- ♦ To provide management support services to Mental Health (MH) Services so that 80 percent of service quality and outcome indicators are achieved.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
Outcome:					
Percent of mental health performance indicators (service quality and outcome) achieved	57%	82%	80% / 60%	80%	80%

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CSB MENTAL HEALTH SERVICES



Inpatient Services

Goal

To facilitate admissions, inpatient consultation, treatment and discharge planning activities related to all CSB clients admitted to the Inova-Mount Vernon Hospital and who are referred to the full time on-site CSB hospital liaison. This includes all CSB clients admitted and/or readmitted to the three contract beds the CSB purchases from Inova for CSB clients who are medically indigent, as well as all other CSB clients admitted and/or readmitted to the Inova-Mount Vernon Hospital.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	2/ 1.5	2/ 1.5	1/ 1	1/ 1	1/ 1
Total Expenditures	\$94,101	\$166,559	\$95,028	\$63,180	\$63,812

Objectives

- ♦ To provide appropriate linkages with Mental Health, Mental Retardation and/or Alcohol and Drug Services to at least 90 percent of clients admitted to the Inova-Mount Vernon Hospital who are referred to the full time on-site CSB hospital liaison.

Performance Indicators

Indicator ¹	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
Output:					
Persons served	260	225	150 / 193	305	305
Efficiency:²					
Annual cost per client	\$1,191	\$1,255	\$624 / \$487	\$394	\$209
Outcome:					
Percent of clients referred to the CSB hospital liaison that are linked with appropriate Mental Health, Mental Retardation and/or Alcohol and Drug Services	NA	NA	NA / NA	90%	90%

¹ Beginning in FY 2000, funds associated with the Mt. Vernon Mental Health Center inpatient services contract were transferred to Mental Health Contract Services. In order to more appropriately reflect the revised function of this Cost Center, new Performance Indicators have been developed for FY 2002.

² Beginning in FY 2001, the efficiency indicator reflects net cost to the County.

FUND 106-30 CSB MENTAL HEALTH SERVICES



Emergency Services

Goal

To provide 24-hour/day comprehensive psychiatric emergency services which include performing all pre-admission screenings and mobile crisis unit services in order to assist individuals in a crisis situation.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	41/ 40	41/ 40	42/ 41	42/ 41	42/ 41
Total Expenditures	\$2,876,988	\$2,835,053	\$2,900,149	\$3,036,210	\$3,066,643

Objectives

- ♦ To provide stabilization services outside of the hospital to 87 percent of clients seen in General Emergency Services.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
COST CENTER: EMERGENCY					
Output:					
Service hours provided ¹	70,262	55,318	47,813 / 60,147	47,813	61,909
Persons seen	6,999	6,236	6,853 / 6,686	6,853	6,686
ACTIVITY: GENERAL EMERGENCY					
Output:					
Service hours provided ¹	51,460	39,004	34,655 / 35,237	34,655	41,900
Persons seen	5,650	5,069	6,000 / 6,207	6,000	6,000
Efficiency:²					
Annual cost per client	\$346	\$497	\$392 / \$375	\$0	\$0
Outcome:					
Percent of clients who receive stabilization services outside of the hospital	87%	96%	87% / 96%	87%	87%

¹FY 1998 Actual "Service hours provided" data is inflated in this Cost Center as a result of using a different data collection method.

² Beginning in FY 2001, the efficiency indicator reflects net cost to the County. As this program is 100 percent funded by non-County funding sources, the net cost to the County in FY 2001 and FY 2002 is \$0.

FUND 106-30

CSB MENTAL HEALTH SERVICES



Day Support Services

Goal

To provide intensive, highly-structured, stabilization, evaluation, and treatment settings for adults with serious mental illness, adolescents with serious emotional disturbance, and dually diagnosed (mental health/substance abuse) clients in order to increase their functional capacity and decrease the need for lengthy hospital stays or institutionalization.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	21/ 21	21/ 21	21/ 21	21/ 21	21/ 21
Total Expenditures	\$1,402,602	\$1,554,222	\$1,505,362	\$1,649,460	\$1,665,257

Objectives

- ◆ To improve individual Global Assessment of Functioning (GAF) scores by at least 10 points for 75 percent of adults served.
- ◆ To improve functional level, as measured by the Child and Adolescent Functional Assessment Scale (CAFAS), by 20 or more points for 50 percent of adolescents served.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
COST CENTER: DAY SUPPORT					
Output:					
Clients served	364	360	365 / 266	365	365
Service hours provided	50,727	45,858	53,018 / 44,306	53,018	53,018
ACTIVITY: ADULT DAY TREATMENT					
Output:					
Clients served	309	304	306 / 227	306	306
Service hours provided	38,285	33,705	41,590 / 33,237	41,590	41,590
Efficiency:¹					
Annual cost per client	\$2,942	\$2,942	\$2,980 / \$3,988	\$1,898	\$2,144
Outcome:					
Percent of clients demonstrating improvement of 10 points or more in GAF score	73%	77%	80% / 67%	80%	75%
ACTIVITY: ADOLESCENT DAY TREATMENT					
Output:					
Clients served	55	56	59 / 39	59	59
Service hours provided	12,442	12,153	11,428 / 11,609	11,428	11,428

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CSB MENTAL HEALTH SERVICES

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
Efficiency:¹					
Annual cost per client	\$7,450	\$7,516	\$7,940 / \$12,753	\$3,058	\$3,663
Service Quality:					
Percent of clients and family members satisfied with services	95%	88%	95% / 92%	95%	95%
Outcome:					
Percent of clients demonstrating improvement of 20 or more points in level of functioning as measured by CAFAS	48%	63%	50% / 31%	50%	50%

¹ Beginning in FY 2001, the efficiency indicator reflects net cost to the County.



Residential Services

Goal

To provide residential treatment and supported residential services to adults with mental illness and youth with serious emotional disturbance in order to assist these adults and children with residing in the community through treatment, support, and case management

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	131/ 130.05	131/ 130.05	133/ 132.5	133/ 132.5	133/ 132.5
Grant	12/ 12	12/ 12	14/ 13	14/ 13	14/ 13
Total Expenditures	\$9,115,886	\$10,185,934	\$9,928,436	\$10,688,481	\$10,777,271

Objectives

- ◆ To enable 80 percent of clients served to move to a more independent level of residential setting within one year.
- ◆ To enable 75 percent of clients served to maintain stable housing for one year or more.

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CSB MENTAL HEALTH SERVICES

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
COST CENTER: RESIDENTIAL					
Output:					
Clients served	1,623	1,454	1,658 / 1,155	1,658	1,411
ACTIVITY: SUPERVISED APARTMENTS					
Output:					
Clients served	106	124	156 / 188	156	156
Service days provided	23,058	28,439	37,464 / 34,074	38,040	38,040
Efficiency:¹					
Annual cost per client	\$10,911	\$11,254	\$15,886 / \$6,912	\$6,051	\$4,419
Service Quality:					
Length of wait for admission	3 months	3 months	3 months / 3 months	3 months	3 months
Outcome:					
Percent of clients able to move to a more independent level of residential setting upon discharge	84%	55%	80% / 72%	80%	80%
ACTIVITY: HOMELESS SERVICES-SHELTER					
Output:					
Clients served	141	80	100 / 280	100	167
Service hours provided	5,123	2,426	3,033 / 2,163	3,033	3,033
Efficiency:¹					
Annual cost per client	\$4,587	\$7,380	\$6,731 / \$2,595	\$7,144	\$6,422
Service Quality:					
Length of wait for admission	4 months	4 months	4 months / 4 months	4 months	4 months
Outcome:					
Percent of clients maintaining stable housing for one or more year	75%	75%	75% / 78%	75%	75%

¹ Beginning in FY 2001, the efficiency indicator reflects net cost to the County.

FUND 106-30

CSB MENTAL HEALTH SERVICES



Outpatient and Case Management Services

Goal

To provide an array of treatment services based upon clinical need in order to improve the functional capacity of adults with serious mental illness and adolescents with serious emotional disturbance. Outpatient Services include short-term focused treatment, such as individual, couples, family, group, and play therapy. Medication management is provided in all programs. Case Management, outreach, family education, and support are also provided.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	152/ 144.6	152/ 144.6	150/ 143.35	152/ 145.85	152/ 145.85
Grant	1/ 1	1/ 1	2/ 2	2/ 2	2/ 2
Total Expenditures	\$11,862,357	\$11,899,907	\$12,194,013	\$12,334,702	\$12,447,128

Objectives

- ♦ To enable 80 percent of clients served to reach 75 percent of their treatment goals at discharge.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
COST CENTER: OUTPATIENT AND CASE MANAGEMENT					
Output:					
Clients served	5,999	5,853	6,200 / 8,736	6,200	6,200
Service hours provided	127,085	185,818	175,344 / 118,986	175,344	175,344
ACTIVITY: ADULT AND FAMILY					
Output:					
Clients served	2,570	2,977	2,570 / 2,433	2,570	2,570
Service hours provided	29,709	32,866	29,709 / 31,879	29,709	29,709
Efficiency:¹					
Annual cost per client	\$1,028	\$1,041	\$1,242 / \$1,354	\$1,047	\$726
Service Quality:					
Percent of satisfied clients	94%	95%	90% / 93%	90%	93%
Outcome:					
Percent of clients who meet 75 percent of treatment goals at discharge ²	35%	36%	80% / 39%	80%	80%

¹ Beginning in FY 2001, the efficiency indicator reflects net cost to the County.

² Beginning in FY 2000, CSB will be commencing a new manner of calculating whether treatment goals have been met. This should result in the outcome measure more closely resembling the percentage outlined in the above objective.

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CSB MENTAL HEALTH SERVICES



Prevention/Early Intervention Services

Goal

To offer prevention and early intervention services for at-risk populations, as well as educate families, community agencies, the public, and other providers about the needs of individuals with mental illness.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	8/ 7	8/ 7	8/ 7	8/ 7	8/ 7
Grant	4/ 2	4/ 2	5/ 2.5	5/ 2.5	5/ 2.5
Total Expenditures	\$541,455	\$510,347	\$642,767	\$674,683	\$681,210

Objectives

- ◆ To enable 98 percent of individuals completing the Men's Program (ADAPT) to avoid being returned to the program by the Courts.
- ◆ To enable 87 percent of participants in the Men's Program (ADAPT) to successfully complete the program.

Performance Indicators

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
Output:					
Persons served in Men's Program	462	369	369 / 357	369	369
Service hours provided	2,647	3,915	2,647 / 4,195	2,647	3,585
Efficiency:¹					
Annual cost per client	\$243	\$322	\$384 / \$396	\$433	\$72
Outcome:					
Percent of clients not returned to Men's Program by the Courts	99%	98%	98% / 100%	98%	98%
Percent of Men's Program participants who complete program	87%	75%	87% / 73%	87%	87%

¹ Beginning in FY 2001, the efficiency indicator reflects net cost to the County.

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CSB MENTAL HEALTH SERVICES



Program of Assertive Community Treatment (PACT)

Goal

To provide assertive, out of the office, treatment, rehabilitation and support services to adults with severe and persistent mental illness. Persons served by PACT Teams have symptoms and impairments not effectively treated by the usual and customary outpatient services and, who, for reasons related to their mental illness, resist or avoid involvement with office based mental health services. The majority of persons served by PACT are therefore at risk of hospitalization, homelessness, or incarceration. PACT Team staffing standards are a maximum of 10:1 consumer to staff ratios, and the PACT Team is available 24-hours-per-day, 365-days-per-year and works with the consumer, no matter whether the consumer deteriorates or grows. The PACT Team provides psychiatric treatment with supervised medication management, crisis intervention, care management, dual diagnosis (alcohol or other drug) services, vocational support, side-by-side life skills training, and family education to persons with severe and persistent mental illnesses at their homes, work sites, and other environments of need.

Cost Center Summary					
Category	FY 2000 Actual	FY 2001 Adopted Budget Plan	FY 2001 Revised Budget Plan	FY 2002 Advertised Budget Plan	FY 2002 Adopted Budget Plan
Authorized Positions/Staff Years					
Grant	12/ 11.8	12/ 11.8	12/ 11.8	12/ 11.8	12/ 11.8
Total Expenditures	\$661,945	\$729,153	\$717,395	\$1,199,243	\$1,209,243

Objectives

- ◆ To improve community tenure by increasing the number of days PACT consumers reside in the community. Specifically, after one year of participation in the PACT program, to enable 90 percent of PACT participants to reside in the community at least 300 days the following 12 months without incidents of hospitalization, incarceration, or homelessness.

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CSB MENTAL HEALTH SERVICES

Performance Indicators

Indicator	Prior Year Actuals ¹			Current Estimate	Future Estimate
	FY 1998 Actual	FY 1999 Actual	FY 2000 Estimate/Actual	FY 2001	FY 2002
Output:					
Clients served	NA	NA	40 / 37	80	80
Service hours provided	NA	NA	10,483 / 13,261	14,509	14,509
Efficiency:²					
Annual cost per client	NA	NA	\$26,320 / \$18,773	\$433	\$5,172
Service Quality:					
Percent of clients satisfied with services	NA	NA	90% / 90%	90%	90%
Outcome:					
Percent of clients who reside in the community the 12 months after one year of participation in the PACT program at least 300 days	NA	NA	90% / NA ³	90%	90%

¹ This Cost Center was not created until FY 2000, therefore information for prior years is not available.

² Beginning in FY 2001, the efficiency indicator reflects net cost to the County. The FY 2001 figure is unusually low due to the carryover of unexpended State funds from FY 2000, which were available due primarily to a delay in starting the program.

³ The first consumers were admitted and enrolled in PACT during FY 2000. This outcome measure takes effect one year after a consumer participates in the PACT program. Therefore, in FY 2002 this outcome will be determined.